

SOUTHOLD TOWN ZONING BOARD OF APPEALS
Phone: (631) 765-1809 Fax (631) 765-9064

INSTRUCTIONS FOR WAIVER OF LOT MERGER APPLICATION

Please submit **eight (8) collated sets** with the **ORIGINAL SIGNED SET** on top:

1. **NOTICE OF DISAPPROVAL** from the Building Inspector dated within the last 60 days, together with copies of permit application and all documents submitted to the Building Department, for ZBA submission.
2. **APPLICATION:** Typed or neatly written, signed by the property owner or representative and notarized. If applicant is not the owner an owner's consent is required. Transactional Disclosure forms are required for owner(s) and agent.
3. **FULL SCALE SURVEYS** for both properties. Surveyor must show wetlands, bulkhead and high bank or bluff contours above MSL, square footage and dimensions of lot(s). Structures and their uses must be shown with setbacks to property lines. (Old surveys MAY be accepted, provided no changes in lot lines have changed and all structures are shown.)
4. **SINGLE-AND SEPARATE SEARCH** noting the Town of Southold as an insured for up to \$25,000, and other information. (Please note: if your deeds for each lot are not dated prior to June 30, 1983, an area variance application, subdivision application, and other agencies would be involved under different procedures, fee, etc.)
5. Copies of **ORIGINAL DEED** transfer prior to and since 1957, and **Current Deeds** for these properties. Proof of the date when the lot was created.
6. **Waiver Questionnaire, ZBA Questionnaire, Agricultural data form**
7. **ENVIRONMENTAL ASSESSMENT FORM**
8. **TOWN PROPERTY CARD** - available from Assessors Office for all properties.
9. **CHECK** payable to "Southold Town Clerk." \$750.00.

The ZBA Office will contact you for scheduling and to request attendance by you and/or your agent representative at the hearing. Our office will provide instructions with the official Legal Notice, a yellow sign for you to post on the subject property, an area map showing the surrounding lots that will require notice by certified mail with a cover letter from you, and later, completed Affidavit forms confirming the mailings and posting.

PLEASE NOTE: IT IS THE APPLICANT/AGENT'S RESPONSIBILITY TO REVIEW THE CONTENTS OF THEIR ZBA OFFICE FILE FOR UPDATES ON ANY CORRESPONDENCE RECEIVED FROM NEIGHBOR'S AND/OR AGENCIES SUCH AS LWRP, COUNTY PLANNING, TRUSTEES, TOWN PLANNING, ETC. PRIOR TO THE DATE OF ANY SCHEDULED PUBLIC HEARING. THANK YOU

NOTE: If your project involves a lot-line change or an increase in use density, this form will **not** apply. See Planning Board for subdivision or lot line change forms, and when appropriate, different ZBA forms (for an area variance) will be available.

For Office Use Only	
Fee: \$ _____	Date Assigned/ZBA File # _____
Filed by: _____	
Office _____	Notes: _____

**WAIVER TO UNMERGE PROPERTY
APPLICATION TO THE SOUTHDOLD TOWN BOARD OF APPEALS**

THIS APPLICATION IS BASED ON THE WRITTEN DETERMINATION OF THE BUILDING INSPECTOR DATED _____ WHEREBY THE BUILDING INSPECTOR DENIED AN APPLICATION DATED _____ under Town Code Chapter 280 (Zoning), Article II, Section 280-____ for:

- ☐ Building Permit
 ☐ Permit for As-Built Construction
☐ Certificate of Occupancy
 ☐ Pre-Certificate of Occupancy
 ☐ Other _____

Owner of Parcel for Waiver: _____

Owner of Adjacent Parcel: _____

Note: If applicant is not the owner, state if applicant is owner's attorney, agent, architect, builder, contract vendee, etc.

Mailing Address: _____

Telephone No: _____ Fax/Email _____

Agent for Owner: _____

Address: _____

Telephone No: _____ Fax/Email: _____

Please specify who you wish correspondence to be mailed to, from the above:

- ☐ Owner, or
 ☐ Authorized Representative

I (we), _____, request that the Zoning Board of Appeals waive the merger and recognize the original lot lines under the provisions of Article II, Sections 280-9, 280-10, 280-11 of the Southold Town Zoning Code, for Suffolk County Tax Map District 1000, Section _____ Block _____ Lot _____ containing _____ square feet located at # _____ Street _____, and for District 1000 Section _____ Block _____ Lot _____ containing _____ square feet. The property is located in the _____ Residential Zone District.

The lot to be unmerged was originally created by deed dated _____, is vacant, and has historically been treated and maintained as a separate and independent residential lot since the date of its original creation.

The lot to be unmerged has not been transferred to an unrelated person or entity since the time the merger was effected.

This application is an alternative to that provided for under other Town Code provisions available for an area variance.

APPLICANT'S REASONS:

(1) The waiver would recognize a lot that is comparable in size to a majority of the improved lots in the neighborhood because:

_____.

(2) The waiver would recognize a lot that is vacant and has historically been treated and maintained as a separate and independent residential lot since the date of its original creation because:

_____.

(3) The proposed waiver and recognition will not create an adverse impact on the physical or environmental conditions in the neighborhood or district because:

_____.

Please check one or more of the following that apply to the lot to be unmerged:

☐ This lot was formerly approved by the Southold Town Planning Board on _____ (attach copy).

☐ This lot was approved or shown on a map approved by the Southold Town Board during 19____ (attach copy).

☐ This lot was approved by the Board of Appeals on _____ (please attach).

☐ A search of Town records found no approvals or other action by the Town of Southold, except for Application # _____ in the Year _____ (please attach copy).

☐ A search of Town records found a Certificate of Occupancy was issued ___/___/___
for a dwelling or other purpose on SCTM Lot #_____ (please attach copy).

(Attach additional sheets if needed).

Owner (Parcel 1)

Sworn to before me this _____ day of _____, 200_____

Notary Public

Owner (Parcel 2)

Sworn to before me this _____ day of _____, 200_____

Notary Public

LOT WAIVER QUESTIONNAIRE

What are the square footage and dimensions of this lot (subject of building department merger application): _____ s.f. _____ ft. by _____ +/- ft.

Date of first deed which created this lot: _____

Date of current deed to present owner: _____

Owners' names of lot at current time: _____

Date and name of subdivision (if any): _____

Size of remaining lot in the merger: _____ s.f.

Were there any building permits issued in the past for this lot: Yes ____ No ____
If yes, please provide copy of former permit and map approved.

Were there any County Health Department approvals in the past for either lot? Yes ____
No ____ . If yes, please provide a copy.

Were there any vacant land Certificates of Occupancy requested in the past?
Yes ____ No ____ . If yes, please provide a copy.

Were there any other Town actions (approvals or denials) in the past regarding this property (such as a pre-existing Certificate of Occupancy for a preexisting building, a variance, lot-line change, Trustees approval, or other type of application to build or use the property in any way)? Yes ____ No ____.

If yes, please provide copy (if available), or explain: _____

Is there any building or structure, such as a patio, driveway, or other, overlapping the deeded lot line which separates the two merged lots?

No. ____ Yes ____ If yes, please explain. _____

How many other vacant lots are on the same block and immediate neighborhood? _____
Please note other approvals or other information about common ownership of these lots: _____

I am an owner of the subject lot and the above information is provided to the best of my knowledge. (Copies noted above are attached.)

Dated:

Owner's Signature

**QUESTIONNAIRE
FOR FILING WITH YOUR ZBA APPLICATION**

- A. Is the subject premises listed on the real estate market for sale?
_____ Yes _____ No
- B. Are there any proposals to change or alter land contours?
_____ No _____ Yes please explain on attached sheet. _____
- C. 1.) Are there areas that contain sand or wetland grasses? _____
2.) Are those areas shown on the survey submitted with this application? _____
3.) Is the property bulk headed between the wetlands area and the upland building area? _____
4.) If your property contains wetlands or pond areas, have you contacted the Office of the Town trustees for its determination of jurisdiction? _____ Please confirm status of your inquiry or application with the Trustees: _____ and if issued, please attach copies of permit with conditions and approved survey.
- D. Is there a depression or sloping elevation near the area of proposed construction at or below five feet above mean sea level? _____
- E. Are there any patios, concrete barriers, bulkheads or fences that exist that are not shown on the survey that you are submitting? _____ Please show area of the structures on a diagram if any exist or state none on the above line.
- F. Do you have any construction taking place at this time concerning your premises? _____ If yes, please submit a copy of your building permit and survey as approved by the Building Department and please describe: _____
- G. Please attach all pre-certificates of occupancy and certificates of occupancy for the subject premises. If any are lacking, please apply to the Building Department to either obtain them or to obtain an Amended Notice of Disapproval.
- H. Do you or any co-owner also own other land adjoining or close to this parcel? _____ If yes, please label the proximity of your lands on your survey.
- I. Please list present use or operations conducted at this parcel _____ and the proposed use _____ . (ex: existing single family, proposed: same with garage, pool or other)

Authorized signature and Date

**AGRICULTURAL DATA STATEMENT
ZONING BOARD OF APPEALS
TOWN OF SOUTHOLD**

WHEN TO USE THIS FORM: The form must be completed by the applicant for any special use permit, site plan approval, use variance, or subdivision approval on property within an agricultural district OR within 500 feet of a farm operation located in agricultural district. All applications requiring an agricultural data statement must be referred to the Suffolk County Department of Planning in accordance with sections 239-m and 239-n of the General Municipal Law.

- 1) Name of Applicant: _____
- 2) Address of Applicant: _____
- 3) Name of Land Owner (if other than applicant) : _____
- 4) Address of Land Owner: _____
- 5) Description of Proposed Project: _____
- 6) Location of Property (road and tax map number): _____
- 7) Is the parcel within an agricultural district? ☐ No ☐ Yes If yes, Agricultural District Number _____
- 8) Is this parcel actively farmed? ☐ No ☐ Yes
- 9) Name and address of any owner(s) of land within the agricultural district containing active farm operation(s) located 500 feet of the boundary of the proposed project. (Information may be available through the Town Assessors Office, Town Hall location (765-1937) or from any public computer at the Town Hall locations by viewing the parcel numbers on the Town of Southold Real Property Tax System.

Name and Address

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

(Please use back side of page if more than six property owners are identified.)

The lot numbers may be obtained, in advance, when requested from the Office of the Planning Board at 765-1938 or the Zoning Board of Appeals at 765-1809.

Signature of Applicant

Date

Note:

1. The local board will solicit comments from the owners of land identified above in order to consider the effect of the proposed action on their farm operation. Solicitation will be made by supplying a copy of this statement.
2. Comments returned to the local board will be taken into consideration as part of the overall review of this application.
3. The clerk to the local board is responsible for sending copies of the completed Agricultural Data Statement to the property owners identified above. The cost for mailing shall be paid by the applicant at the time the application is submitted for review. Failure to pay at such time means the application is not complete and cannot be acted upon by the board.

617.20
Appendix B
Short Environmental Assessment Form

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Name of Action or Project:			
Project Location (describe, and attach a location map):			
Brief Description of Proposed Action:			
Name of Applicant or Sponsor:		Telephone:	
		E-Mail:	
Address:			
City/PO:		State:	Zip Code:
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation?			NO
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			YES
2. Does the proposed action require a permit, approval or funding from any other governmental Agency?			NO
If Yes, list agency(s) name and permit or approval:			YES
3.a. Total acreage of the site of the proposed action? _____ acres			
b. Total acreage to be physically disturbed? _____ acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres			
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Parkland			

5. Is the proposed action, a. A permitted use under the zoning regulations?	NO	YES	N/A
b. Consistent with the adopted comprehensive plan?			
6. Is the proposed action consistent with the predominant character of the existing built or natural landscape?	NO	YES	
7. Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area? If Yes, identify: _____	NO	YES	
8. a. Will the proposed action result in a substantial increase in traffic above present levels?	NO	YES	
b. Are public transportation service(s) available at or near the site of the proposed action?			
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?			
9. Does the proposed action meet or exceed the state energy code requirements? If the proposed action will exceed requirements, describe design features and technologies: _____	NO	YES	
10. Will the proposed action connect to an existing public/private water supply? If No, describe method for providing potable water: _____	NO	YES	
11. Will the proposed action connect to existing wastewater utilities? If No, describe method for providing wastewater treatment: _____	NO	YES	
12. a. Does the site contain a structure that is listed on either the State or National Register of Historic Places?	NO	YES	
b. Is the proposed action located in an archeological sensitive area?			
13. a. Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?	NO	YES	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____			
14. Identify the typical habitat types that occur on, or are likely to be found on the project site. Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban			
15. Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?	NO	YES	
16. Is the project site located in the 100 year flood plain?	NO	YES	
17. Will the proposed action create storm water discharge, either from point or non-point sources? If Yes, a. Will storm water discharges flow to adjacent properties? <input type="checkbox"/> NO <input type="checkbox"/> YES b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? <input type="checkbox"/> NO <input type="checkbox"/> YES If Yes, briefly describe: _____	NO	YES	

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____	NO	YES
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____	NO	YES
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____	NO	YES
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: _____ Date: _____ Signature: _____		

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?		
2. Will the proposed action result in a change in the use or intensity of use of land?		
3. Will the proposed action impair the character or quality of the existing community?		
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?		
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?		
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?		
7. Will the proposed action impact existing: a. public / private water supplies?		
b. public / private wastewater treatment utilities?		
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?		
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?		

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?		
11. Will the proposed action create a hazard to environmental resources or human health?		

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

- ☐ Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
- ☐ Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

Name of Lead Agency

Date

Print or Type Name of Responsible Officer in Lead Agency

Title of Responsible Officer

Signature of Responsible Officer in Lead Agency

Signature of Preparer (if different from Responsible Officer)

**AGENT/REPRESENTATIVE
TRANSACTIONAL DISCLOSURE FORM**

The Town of Southold's Code of Ethics prohibits conflicts of interest on the part of town officers and employees. The purpose of this form is to provide information which can alert the town of possible conflicts of interest and allow it to take whatever action is necessary to avoid same.

YOUR NAME : _____
(Last name, first name, middle initial, unless you are applying in the name of someone else or other entity, such as a company. If so, indicate the other person's or company's name.)

TYPE OF APPLICATION: (Check all that apply)

Tax grievance _____	Building Permit _____
Variance _____	Trustee Permit _____
Change of Zone _____	Coastal Erosion _____
Approval of Plat _____	Mooring _____
Other (activity) _____	Planning _____

Do you personally (or through your company, spouse, sibling, parent, or child) have a relationship with any officer or employee of the Town of Southold? "Relationship" includes by blood, marriage, or business interest. "Business interest" means a business, including a partnership, in which the town officer or employee has even a partial ownership of (or employment by) a corporation in which the town officer or employee owns more than 5% of the shares.

YES _____ NO _____

If No, sign and date below. If Yes, complete the balance of this form and date and sign where indicated.

Name of person employed by the Town of Southold _____

Title or position of that person _____

Describe the relationship between yourself (the applicant/agent/representative) and the town officer or employee.

Either check the appropriate line A) through D) and/or describe in the space provided.

The town officer or employee or his or her spouse, sibling, parent, or child is (check all that apply) :

- _____ A) the owner of greater than 5% of the shares of the corporate stock of the applicant (when the applicant is a corporation)
- _____ B) the legal or beneficial owner of any interest in a non-corporate entity (when the applicant is not a corporation)
- _____ C) an officer, director, partner, or employee of the applicant; or
- _____ D) the actual applicant

DESCRIPTION OF RELATIONSHIP

Submitted this _____ day of _____, 20____

Signature _____

Print Name _____

**APPLICANT/OWNER
TRANSACTIONAL DISCLOSURE FORM**

The Town of Southold's Code of Ethics prohibits conflicts of interest on the part of town officers and employees. The purpose of this form is to provide information which can alert the town of possible conflicts of interest and allow it to take whatever action is necessary to avoid same.

YOUR NAME : _____
(Last name, first name, middle initial, unless you are applying in the name of someone else or other entity, such as a company. If so, indicate the other person's or company's name.)

TYPE OF APPLICATION: (Check all that apply)

Tax grievance _____	Building Permit _____
Variance _____	Trustee Permit _____
Change of Zone _____	Coastal Erosion _____
Approval of Plat _____	Mooring _____
Other (activity) _____	Planning _____

Do you personally (or through your company, spouse, sibling, parent, or child) have a relationship with any officer or employee of the Town of Southold? "Relationship" includes by blood, marriage, or business interest. "Business interest" means a business, including a partnership, in which the town officer or employee has even a partial ownership of (or employment by) a corporation in which the town officer or employee owns more than 5% of the shares.

YES _____ NO _____

If No, sign and date below. If YES, complete the balance of this form and date and sign where indicated.

Name of person employed by the Town of Southold _____

Title or position of that person _____

Describe the relationship between yourself (the applicant/agent/representative) and the town officer or employee. Either check the appropriate line A) through D) and/or describe in the space provided.

The town officer or employee or his or her spouse, sibling, parent, or child is (check all that apply) :

- _____ A) the owner of greater than 5% of the shares of the corporate stock of the applicant (when the applicant is a corporation)
- _____ B) the legal or beneficial owner of any interest in a non-corporate entity (when the applicant is not a corporation)
- _____ C) an officer, director, partner, or employee of the applicant; or
- _____ D) the actual applicant

DESCRIPTION OF RELATIONSHIP

Submitted this _____ day of _____, 20____

Signature _____

Print Name _____

Board of Zoning Appeals Application

AUTHORIZATION

(Where the Applicant is not the Owner)

I, _____ residing at _____
(Print property owner's name) (Mailing Address)

_____ do hereby authorize _____
(Agent)

_____ to apply for variance(s) on my behalf from the

Southold Zoning Board of Appeals.

(Owner's Signature)

(Print Owner's Name)

LWRP CONSISTENCY ASSESSMENT FORM

A. INSTRUCTIONS

1. All applicants for permits* including Town of Southold agencies, shall complete this CCAF for proposed actions that are subject to the Town of Southold Waterfront Consistency Review Law. This assessment is intended to supplement other information used by a Town of Southold agency in making a determination of consistency. **Except minor exempt actions including Building Permits and other ministerial permits not located within the Coastal Erosion Hazard Area.*
2. Before answering the questions in Section C, the preparer of this form should review the exempt minor action list, policies and explanations of each policy contained in the Town of Southold Local Waterfront Revitalization Program. A proposed action will be evaluated as to its significant beneficial and adverse effects upon the coastal area (which includes all of Southold Town).
3. If any question in Section C on this form is answered "yes", then the proposed action may affect the achievement of the LWRP policy standards and conditions contained in the consistency review law. Thus, the action should be analyzed in more detail and, if necessary, modified prior to making a determination that it is consistent to the maximum extent practicable with the LWRP policy standards and conditions. If an action cannot be certified as consistent with the LWRP policy standards and conditions, it shall not be undertaken.

A copy of the LWRP is available in the following places: online at the Town of Southold's website (southoldtown.northfork.net), the Board of Trustees Office, the Planning Department, all local libraries and the Town Clerk's office.

B. DESCRIPTION OF SITE AND PROPOSED ACTION

SCTM# _____ - _____ - _____

The Application has been submitted to (check appropriate response):

Town Board ☐ Planning Board ☐ Building Dept. ☐ Board of Trustees ☐

1. Category of Town of Southold agency action (check appropriate response):

- (a) Action undertaken directly by Town agency (e.g. capital construction, planning activity, agency regulation, land transaction) ☐
- (b) Financial assistance (e.g. grant, loan, subsidy) ☐
- (c) Permit, approval, license, certification: ☐

Nature and extent of action:

Location of action: _____

Site acreage: _____

Present land use: _____

Present zoning classification: _____

2. If an application for the proposed action has been filed with the Town of Southold agency, the following information shall be provided:

(a) Name of applicant: _____

(b) Mailing address: _____

(c) Telephone number: Area Code () _____

(d) Application number, if any: _____

Will the action be directly undertaken, require funding, or approval by a state or federal agency?

Yes ☐ No ☐ If yes, which state or federal agency? _____

C. DEVELOPED COAST POLICY

Policy 1. Foster a pattern of development in the Town of Southold that enhances community character, preserves open space, makes efficient use of infrastructure, makes beneficial use of a coastal location, and minimizes adverse effects of development. See LWRP Section III – Policies; Page 2 for evaluation criteria.

☐ Yes ☐ No ☐ Not Applicable

Attach additional sheets if necessary

Policy 2. Protect and preserve historic and archaeological resources of the Town of Southold. See LWRP Section III – Policies Pages 3 through 6 for evaluation criteria

☐ Yes ☐ No ☐ Not Applicable

Attach additional sheets if necessary

Policy 3. Enhance visual quality and protect scenic resources throughout the Town of Southold. See LWRP Section III – Policies Pages 6 through 7 for evaluation criteria

☐ Yes ☐ No ☐ Not Applicable

Attach additional sheets if necessary

NATURAL COAST POLICIES

Policy 4. Minimize loss of life, structures, and natural resources from flooding and erosion. See LWRP Section III – Policies Pages 8 through 16 for evaluation criteria

☐ Yes ☐ No ☐ Not Applicable

Attach additional sheets if necessary

Policy 5. Protect and improve water quality and supply in the Town of Southold. See LWRP Section III – Policies Pages 16 through 21 for evaluation criteria

☐ Yes ☐ No ☐ Not Applicable

Attach additional sheets if necessary

Policy 6. Protect and restore the quality and function of the Town of Southold ecosystems including Significant Coastal Fish and Wildlife Habitats and wetlands. See LWRP Section III – Policies; Pages 22 through 32 for evaluation criteria.

☐ Yes ☐ No ☐ Not Applicable

Attach additional sheets if necessary

Policy 7. Protect and improve air quality in the Town of Southold. See LWRP Section III – Policies Pages 32 through 34 for evaluation criteria.

☐ Yes ☐ No ☐ Not Applicable

Attach additional sheets if necessary

Policy 8. Minimize environmental degradation in Town of Southold from solid waste and hazardous substances and wastes. See LWRP Section III – Policies; Pages 34 through 38 for evaluation criteria.

☐ Yes ☐ No ☐ Not Applicable

PUBLIC COAST POLICIES

Policy 9. Provide for public access to, and recreational use of, coastal waters, public lands, and public resources of the Town of Southold. See LWRP Section III – Policies; Pages 38 through 46 for evaluation criteria.

☐ Yes ☐ No ☐ Not Applicable

Attach additional sheets if necessary

WORKING COAST POLICIES

Policy 10. Protect Southold's water-dependent uses and promote siting of new water-dependent uses in suitable locations. See LWRP Section III – Policies; Pages 47 through 56 for evaluation criteria.

☐ Yes ☐ No ☐ Not Applicable

Attach additional sheets if necessary

Policy 11. Promote sustainable use of living marine resources in Long Island Sound, the Peconic Estuary and Town waters. See LWRP Section III – Policies; Pages 57 through 62 for evaluation criteria.

☐ Yes ☐ No ☐ Not Applicable

Attach additional sheets if necessary

Policy 12. Protect agricultural lands in the Town of Southold. See LWRP Section III – Policies; Pages 62 through 65 for evaluation criteria.

☐ Yes ☐ No ☐ Not Applicable

Attach additional sheets if necessary

Policy 13. Promote appropriate use and development of energy and mineral resources. See LWRP Section III – Policies; Pages 65 through 68 for evaluation criteria.

☐ Yes ☐ No ☐ Not Applicable

Created on 5/25/05 11:20 AM